Camp Harpswell

For incoming 1st graders to incoming 5th graders

Jun. 20-24; Jun. 27-Jul. 1, 2016

Harpswell Community School

Monday - Thursday   9:30 - 4:30
Friday   9:30 - 12:30

Let the **FUN** begin!

- ☺ **Sports:** tennis, basketball, floor hockey, football, and relay races.
- ☺ **Art**
- ☺ **Crafts**
- ☺ **Goop & Gunk**
- ☺ **Games**
- ☺ **Free time**

and much more!

Optional Summer Swim Program 8:00 – 9:00 a.m.

Participants who pre-registered and paid for the 8:00–9:00 a.m. Summer Swim class, and register for Camp Harpswell, will be bused from Bowdoin College. Parents are responsible for picking up their children at the end of the Camp day.

NOTE: *Program does not exceed 30 participants per week. It fills fast. Maine Camp standards for Camper-to-Counselor ratio is 6:1.* Harpswell residents get first priority. Non-residents will be considered thereafter on a space-available basis.

FMI: Gina Perow, Recreation Director, 833-5771 or recreation@town.harpswell.me.us Additional information will be sent to participants prior to Camp starting.

Make checks payable to: **Town of Harpswell**

Mail Registration form and fee to: Town of Harpswell, Recreation Dept.
P.O. Box 39, Harpswell, ME 04079

Registration for

Camp Harpswell 2016

Please Print Clearly

Parent Name_____
Address_____
_____ Zip_____
Home ph.#_____Cell_____
Work ph.#_____
E-mail_____
Best way to reach you____Phone ____Text ____E-mail

Parent Name_____
Address_____
_____ Zip_____
Home ph.#_____Cell_____
Work ph.#_____
E-mail_____
Best way to reach you____Phone ____Text ____E-mail

Emergency Contacts (NAME & PHONE NUMBER)

#1_____   #2_____

Camp Harpswell Enrollment OPTIONS:

A. June 20-24 $100   **B.** June 27-July 1 $100   **C.** Both Weeks $180
D. Non-resident (space available) $25 **E.** Applying for scholarship (Harpswell residents only)

Medical & Social Information

(MEDICAL, SOCIAL, OR EMOTIONAL INFORMATION WILL HELP COACHES AND OFFICIALS ENSURE THE BEST EXPERIENCE FOR YOUR CHILD)

Physician_____   Phone_____
Dentist_____   Phone_____

	TOTAL FROM ABOVE
1. Child's Name_____ DOB_____ Grade in Sept._____ Allergies, Other Concerns_____ Option Letters (check all that apply) ____A ____B ____C ____D ____E	$ _____
2. Child's Name_____ DOB_____ Grade in Sept._____ Allergies, Other Concerns_____ Option Letters (check all that apply) ____A ____B ____C ____D ____E	$ _____
3. Child's Name_____ DOB_____ Grade in Sept._____ Allergies, Other Concerns_____ Option Letters (check all that apply) ____A ____B ____C ____D ____E	$ _____

❏ **My child(ren) will be attending SUMMER SWIM 8:00 - 9:00 A.M.**
(**must register and pay separately**)

❏ **I would like to volunteer**

Subtotal:	
Late fee after JUNE 1 $25	
Balance due:	

Participant Release/Assumption of Risk Agreement/Agreement to Indemnify & Hold Harmless

Each person signing below understands that participation in the Town of Harpswell ("Town") program, activity and/or special event can involve the risk of damage and injury, including serious injury, to both people and property. Each person signing below understands and agrees that the Town, its agents, officers and employees, accept no responsibility, and will not be liable, for any injury, harm or damage to his/her person or property (including, but not limited to, injury, harm or damage caused by negligence of the Town, its agents, officers or employees) occurring during or arising out of participation in any Town program, activity and/or special event. To the fullest extent permitted by law, each person signing below agrees to assume all risk of injury, harm or damage to his/her person or property arising during or in connection with said Town program, activity and/or special event. Each person signing below hereby releases and agrees to indemnify and hold harmless the Town and, its agents, officers and employees, from any and all liability, actions, damages and claims of any kind and nature whatsoever for any injury, harm or damage to his/her person or property (including, but not limited to, injury, harm or damage caused by negligence of the Town, its agents, officers or employees) that may arise or occur during or in connection with said program, activity and/or special event.   **Photos & videos taken may be used for local publicity, website & Facebook**

Parent Signature _____Date_____

Return Completed Form to the Town Office   There is an after-hour drop box to the right of the glass entrance   *flyer by* dee miskill